

Illinois Opioid Crisis Response Advisory Council Meeting

January 16, 2018

MEETING MINUTES

Dr. Maria Bruni, Assistant Secretary of Programs, welcomed the group and thanked everyone for their participation. Lt. Governor Sanguinetti also thanked the Council for their work, and shared that she continues to meet with groups across the state, gathering information on how the opioid crisis is impacting communities and how the Action Plan can best address these issues.

Illinois Department of Public Health (IDPH) Updates

Amanda Kim, Head of Strategic Health Initiatives, gave the following IDPH updates. (See meeting handouts for more information on the IDPH updates).

- Funded by SAMHSA, IDPH's First Responder CARA grant targets 18 counties in South-Central Illinois that have high opioid overdose death rates. Grant activities include: naloxone provision and training to law enforcement agencies; establishing referral networks and care coordination; and public awareness campaigns on naloxone and Illinois' "Good Samaritan" laws.
- IDPH signed agreements with two platforms to track overdoses in real-time. ODMAP uses geo-tagging capacities for first responders (law enforcement) to report overdoses and naloxone administrations in real-time. IDPH and the Illinois State Police are participating in ODMAP, with the goal of rolling out this platform statewide so that we have one single reporting system (See <http://www.hidta.org/odmap/>). BioSpatial uses EMS data that IDPH already collects, and produces analytics to track overdoses in real-time.
- The *State of Illinois Comprehensive Opioid Data Report* was released on December 4, 2017. This report provides a comprehensive epidemiological snapshot of the impact of opioids in Illinois and can be found here:
http://www.dph.illinois.gov/sites/default/files/publications/publicationsdoil-opioid-data-report_0.pdf

Illinois Department of Human Services/Division of Alcoholism and Substance Abuse (IDHS/DASA) Updates

Danielle Kirby, Deputy Director, Planning, Performance Assessment and Federal Programs at IDHS/DASA gave an update on the Helpline. (See meeting handouts for more information about the Helpline).

- The *Illinois Helpline for Opioids and Other Substances* (1-833-2FINDHELP) was launched on December 5, 2017. The Helpline is available 24 hours a day, 7 days a week. Helpline specialists who answer calls are trained in evidence-based approaches to connect callers with treatment and recovery support services. People can call for help and/or information (including information on naloxone) for themselves or others. Helpline specialists also offer outreach and engagement to connect people to treatment. Over the next few months, Helpline specialists will be able to help connect callers who are on Medicaid to the appropriate managed care organization (MCO). A provider portal also will be added in the future to help connect callers to current, existing services.
- The Helpline has received 839 calls as of January 11, 2018. Of these calls, 36% were abandoned calls (callers hung up before the call rang through to an agent); 30% were quick calls (calls for information) and 34% were referral calls (agents referred callers to services). Slightly more than half of callers (53.6%) were between the ages of 20-39 years of age. Most calls (49%) were from Chicago/Cook County (DHS Region 1).

- The Helpline is being actively and widely promoted across systems and sectors. To date, 953 boxes of Helpline business cards (approximately 500,000 cards) have been distributed to hospitals, providers, child welfare, schools, state parks, criminal justice, social services, and law enforcement – including the Illinois State Police. Family Community Resource Center (FCRC) case workers all have cards and use them to help make referrals to people on their caseloads who may have opioid use disorder (OUD). IDHS/DASA is working with the Outdoor Advertising Association to put information about the Helpline on billboards. It was suggested that a one-page FAQ sheet explaining the Helpline, in addition to the business cards, might be a good promotional tool. Council members are encouraged to promote the Helpline. Business cards are free and can be ordered at: <http://www.dhs.state.il.us/OneNetLibrary/27896/documents/FINAL.pdf>. Helpline graphics can be downloaded at <http://www.dhs.state.il.us/page.aspx?item=100039>.

Assistant Secretary Bruni described joint DASA and IDPH efforts to identify DATA-waivered buprenorphine providers in Illinois and their prescribing practices (See meeting handouts for more information on these activities). These efforts grew out an initial survey conducted by Dr. Elizabeth Salisbury Afshar and her team at the Chicago Department of Public Health.

- SAMHSA data show that, as of October 2017, there were 956 DATA-waivered providers in Illinois. Of these providers, 62% were active (had prescribed buprenorphine in the past year); 12% were inactive (had prescribed buprenorphine but not in the past year); and 26% had never prescribed buprenorphine. The majority of active providers are in Cook County.
- DASA and IDPH are working together to learn more about prescribing practices, including barriers inactive providers may be facing that are preventing them from prescribing buprenorphine, and active providers' capacity to take new patients. DASA will be conducting a survey with providers and will ask them about prescribing practices, practice settings, whether they are accepting new patients and if they accept Medicaid. Assistant Secretary Bruni asked the Council to submit additional questions for the survey (send questions to Sue Pickett at spickett@ahpnet.com).
 - Council members shared that providers have recently encountered problems with prior authorization with suboxone, including changes to the MCO's formulary regarding dose allowance. It was suggested that this might be a good survey question, along with asking providers to identify their specific specialty.

Council Committee Recommendations

Assistant Secretary Bruni thanked the Committees for their work drafting recommendations for implementing Action Plan strategies. Sue Pickett gave a brief overview of the recommendations:

- In October 2017, the Governor's Opioid Prevention and Intervention Task Force charged the Council to develop recommendations for each of the nine strategies in the *State of Illinois Opioid Action Plan*. The Task Force asked that recommendations include goals and metrics; be prioritized by cost and impact; and be feasible within existing resources.
- Themes across recommendations include: providing training and technical assistance; building upon existing resources and identifying new revenue sources; providing evidence-based services; and assessing metrics over time to measure implementation success. The Task Force is encouraged to consider recommendations to develop and implement policy changes critical to saving lives and ending the opioid epidemic.
- Committee Chairs reviewed their respective recommendations. These recommendations are listed below. Please see the handout *Illinois Opioid Crisis Response Advisory Council: Recommendations for Implementing Plan Strategies* for the full list of recommendations, goals and metrics.

Discussion points raised by the Council:

- Recent, ongoing efforts have already had an impact on these recommendations. For example, since SB772 went into effect on January 1, there are now 53,000 enrollees in the PMP.
- The Prescribing Practices Committee had several in-depth conversations about whether and how increased PMP use and prescribing guidelines might lead some patients to get their opioids on the street (e.g. their doctors no longer prescribe opioids for them so they seek their drugs elsewhere). We need to follow best practice guidelines, treat people individually, and increase treatment capacity to help avoid this. Additionally, we may be able to look at private insurance claims data to determine if and how this is happening.
- It was suggested that metrics for outpatient providers and those who do not have EMRs might be needed. However, Council members noted that SB772 mandates that providers check the PMP regardless of whether they have an EMR system.
- The recommendation for Strategy #8 that pharmacists contact providers about co-prescribing naloxone is not necessary under the Standing Order. However, it was noted that studies suggest that many pharmacists are not telling people about naloxone, so this recommendation was made to help create a “united front” between providers and pharmacists and encourage people who are prescribed 50 MME or higher to have naloxone.
- It’s critical to get naloxone into the hands of as many people as possible—including families.
- There are good resource materials available for providers that use motivational interviewing approaches to address behavior changes in people who have experienced an overdose. A link to these resources will be sent to the Council.
- Assistant Secretary Bruni thanked the Committees for their work. The Task Force meets on Friday, January 19th and will begin their review of these recommendations. The recommendations will be part of the Implementation Plan. It is anticipated that the Implementation Plan will be an electronic document that is updated regularly and posted on the IDPH and DASA websites, and eventually the State’s comprehensive website.

Announcements

- Future Council meeting dates and times:
 - February 15, 2018; 10 AM – 12 PM
 - March 12, 2018; 10 AM – 12 PM
 - April 16, 2018; 10 AM – 12 PM
 - May 14, 2018; 10 AM – 12 PM
 - June 11, 2018; 10 AM – 12 PM

Note: Meeting locations are to be determined. We will send meeting location, call-in telephone numbers, etc., prior to each meeting.

- Please send links to resources to Sue Pickett (spickett@ahpnet.com).
- DASA will include a summary of all Opioid STR grant activities with the minutes.
- ICJIA recently released a new article: *Exploring Effective Post-Opioid Overdose Reversal Responses for Law Enforcement and Other First Responders*
<http://www.icjia.state.il.us/articles/exploring-effective-post-opioid-overdose-reversal-responses-for-law-enforcement-and-other-first-responders>